



June 22, 2021

Web Announcement 2529

Professional Crossover Encounter Claims Reprocessed

When billing a provider specific encounter code, the provider must bill Nevada Medicaid for the encounter rate minus any Third Party Liability (TPL)/Medicare payment. Professional crossover encounter claims with dates of service on or after May 1, 2019, through June 21, 2019, that paid without the TPL/Medicare payment deduction have been automatically reprocessed to adjudicate the claims correctly. Results of the reprocessed claims appear on remittance advices dated June 25, 2021.

Please note: When claims are reprocessed, please be aware that all system and clinical claim editor edits are applicable. As a result, there may be no additional payment, and other claim denials may be received. Providers have the right to appeal denied claims, including those denied upon reprocessing. Please refer to [Medicaid Services Manual Chapter 100](#) and the [Billing Manual](#) for information concerning the claim appeal process and time frames.

The impacted provider types are:

Provider Type	Provider Type Description
17 (Specialty 180)	Special Clinics: Rural Health Clinics (RHC)
17 (Specialty 181)	Special Clinics: Federally Qualified Health Centers (FQHC)
17 (Specialty 182)	Special Clinics: Indian Health Services, Non-Tribal
17 (Specialty 188)	Special Clinics: Certified Community Behavioral Health Center (CCBHC)
47	Indian Health Services (IHS) and Tribal Clinics
51	Indian Health Services Hospital, Inpatient (Tribal)
52	Indian Health Services Hospital, Outpatient (Tribal)
78	Indian Health Services Hospital, Inpatient (Non-Tribal)
79	Indian Health Services Hospital, Outpatient (Non-Tribal)